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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 <small>(Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818))</small>		Docket Number (Optional) 97-0022/COG (8470-000138/US/COA)
Application Number 10/781175	Filed February 18, 2004	
For Retrofittable Severe Duty Seal For A Shaft		
Art Unit 3679	Examiner V. A. Patel	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below)		
	Fee	Small Entity Fee
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card Form PTO-2038 is attached <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____ I have enclosed a duplicate copy of this sheet		
I am the	<input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. <small>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</small> <input checked="" type="checkbox"/> attorney or agent of record Registration Number <u>29,597</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34 <small>Registration number if acting under 37 CFR 1.34</small> <u>Ronald W. Wangerow</u> <small>Signature</small> <u>Ronald W. Wangerow</u> <small>Typed or printed name</small>	
	<u>June 14</u> , 2006 <small>Date</small>	
	<u>(734) 354-5445</u> <small>Telephone Number</small>	
<small>NOTE. Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>		
<input type="checkbox"/>	Total of _____ forms are submitted.	

01 FC:1081 99.00 OP
 06/15/2006 MBINAS 88888883 10781175
 02 FC:1251 129.00 OP
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